



CITY OF TUCSON
HOUSING & COMMUNITY DEVELOPMENT DEPARTMENT

Landlord Incentive Program Form

Date of Request: _____

Participant Name: _____ Client Number: _____

Unit Address: _____

City: _____ State _____ Zip Code: _____

Owner Name: _____

Owner Address _____

City: _____ State _____ Zip Code: _____

Owner Phone #: _____ Fax# _____ Email _____

Please indicate which of these criteria you meet that will allow for the Landlord Incentive Program Sign on Bonus:

☐ New landlord that submitted a Request for Tenancy (RTA) and signed Housing Assistance Payment Contract (HAP):
_____ Requested Rent _____ Approved Rent

☐ Existing landlord that submitted a Request for Tenancy (RTA) and signed Housing Assistance Payment (HAP):
_____ Requested Rent _____ Approved Rent

Owner/Agent Signature _____ Date _____

Office use only:

Type of Lease

- ☐ Change of Unit
- ☐ New Admission
- ☐ Lease Renewal

Landlord Type

- ☐ New Landlord
- ☐ Existing Landlord

New Landlord Incentive

- ☐ Incentive #1 -1.5 Months (only)
- ☐ Incentive #2 – Leasing Bonus (only)
- ☐ Incentive #3 – Leasing Bonus + Rent Differential Payment

Existing Landlord Incentive

- ☐ Incentive #1 – Lease Renewal (only)
- ☐ Incentive #2 – Lease Renewal Bonus + Rent Differential Payment

Total Amount issued to landlord: _____

Supervisor/Manager – HCV Program Signature

Date Submitted to Finance

If you should require an accommodation or alternative arrangements due to a disability, please call (520) 791-4739.

If you require an oral interpretation in a language other than English, please call (520) 791-4739.

Si requiere una interpretación oral en un idioma que no sea inglés, por favor llame al (520) 791-4739.